
OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS FOR PAYMENT	Article IV, Section 432(2), Pennsylvania Public Welfare Code.
EFFECTIVE DATE	January 1, 1974.
ADMINISTRATION¹	Social Security Administration and State Department of Public Welfare.
PASSALONG	In compliance by the method of maintaining all payment levels.
SCOPE OF COVERAGE	Optional supplement provided to aged, blind, and disabled persons who receive SSI payments or would receive them but for excess income. Persons residing in public institutions or in certified medical facilities where Medicaid is paying more than 50 percent of the cost of care are not eligible for supplementation. Blind and disabled children are eligible for optional supplementation, except for domiciliary care and personal-care boarding homes where they must be age 18 or over. Recipients in medical facilities who are eligible for Federal payments under Section 1611(e)(1)(E) receive State optional supplementation (code A payment level) for up to 3 months.
RECOVERIES, LIENS, AND ASSIGNMENTS	None.
RELATIVE RESPONSIBILITY	None.
INCOME DISREGARDS	No disregards in addition to the Federal income disregards.
RESOURCE LIMITATIONS	Federal SSI resource limitations apply.
PLACE OF APPLICATION	Social Security Administration.
FUNDING	Assistance: State funds. Administration: State funds.

¹ State determines eligibility for domiciliary-care and personal-care boarding home supplement; Social Security Administration administers all State supplementary payments including mandatory minimum supplementation.

**INTERIM
ASSISTANCE**

State participates.

PAYMENT LEVELS²

<u>Code</u>	<u>Living arrangements</u>	<u>Combined Federal/State</u>		<u>State supplementation</u>	
		<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
A	Living alone	\$497.40	\$748.70	\$27.40	\$43.70
B	Living in household of another	340.74	513.70	27.40	43.70
C	Living with an essential person ³	748.70	1,008.05	43.70	68.05
D	Living with an essential person in household of another ³	513.70	694.72	43.70	68.05
G	Domiciliary-care facility for adults	799.30	1,442.40	329.30	737.40
H	Personal-care boarding home	804.30	1,452.40	334.30	747.40

STATE ASSISTANCE FOR SPECIAL NEEDS**ADMINISTRATION**

State Department of Public Welfare.

**SPECIAL NEED
CIRCUMSTANCES:****BURIAL
EXPENSES**

Up to \$350 in absence of other resources to meet cost.

**MOVING
EXPENSES**

If moving required because of eviction or for health and welfare reasons, up to \$200 may be paid (once in a 12 month period).

**MEDICAL
TRANSPORTATION
EXPENSES**

Provides transportation to and from medical appointments for those who need assistance.

² Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.³ Applies only to cases converted from former State assistance programs.

MEDICAID**ELIGIBILITY:**

CRITERION	SSI program guidelines (title XVI).
DETERMINED BY	Social Security Administration.
MEDICALLY NEEDY PROGRAM	Program for the aged, blind, and disabled medically needy.
UNPAID MEDICAL EXPENSES	The Social Security Administration obtains this information.